## PART B - FEE(S) TRÂNSMITTAL

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| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)               |                                                                                                            |                       |                                                                                                                                                                                                                                                                                                                                                    | Fee(s) Transmittal. T                                                                          | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.                                                           |                             |  |
|--------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|-----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|--|
| 000026021 75                                                                               | 590 05/03/2006                                                                                             |                       |                                                                                                                                                                                                                                                                                                                                                    |                                                                                                | •                                                                                                                                                                                                                                                                                                                                                       |                             |  |
| HOGAN & HARTSON L.L.P.<br>500 S. GRAND AVENUE<br>SUITE 1900<br>LOS ANGELES, CA 90071-2611  |                                                                                                            |                       |                                                                                                                                                                                                                                                                                                                                                    | I hereby certify that<br>States Postal Service<br>addressed to the Ma<br>transmitted to the US | Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. |                             |  |
|                                                                                            |                                                                                                            |                       |                                                                                                                                                                                                                                                                                                                                                    | Tom Wyatt                                                                                      | Fom Wyatt (Depositor's name                                                                                                                                                                                                                                                                                                                             |                             |  |
|                                                                                            |                                                                                                            |                       |                                                                                                                                                                                                                                                                                                                                                    | Jon What                                                                                       | N.                                                                                                                                                                                                                                                                                                                                                      | (Signature)                 |  |
|                                                                                            |                                                                                                            |                       |                                                                                                                                                                                                                                                                                                                                                    | July 26, 2006                                                                                  |                                                                                                                                                                                                                                                                                                                                                         | (Date)                      |  |
| APPLICATION NO.                                                                            | APPLICATION NO. FILING DATE                                                                                |                       | FIRST NAMED INVENTOR                                                                                                                                                                                                                                                                                                                               |                                                                                                | ATTORNEY DOCKET NO.                                                                                                                                                                                                                                                                                                                                     | CONFIRMATION NO.            |  |
| 09/893,032                                                                                 | ,032 06/26/2001 Naoyo                                                                                      |                       |                                                                                                                                                                                                                                                                                                                                                    | Ogino 81784.0239 3402                                                                          |                                                                                                                                                                                                                                                                                                                                                         |                             |  |
| ANTI-SHOCK MECHANI                                                                         | SM AND A CD-ROM DEC                                                                                        | ODER                  |                                                                                                                                                                                                                                                                                                                                                    | SK PLAYER HAVING A S                                                                           | ,                                                                                                                                                                                                                                                                                                                                                       |                             |  |
| APPLN. TYPE                                                                                | SMALL ENTITY                                                                                               | ISSUE FEE             |                                                                                                                                                                                                                                                                                                                                                    | PUBLICATION FEE                                                                                | TOTAL FEE(S) DUE                                                                                                                                                                                                                                                                                                                                        | DATE DUE                    |  |
| nonprovisional                                                                             | NO ·                                                                                                       | \$1400                |                                                                                                                                                                                                                                                                                                                                                    | \$300                                                                                          | \$1700                                                                                                                                                                                                                                                                                                                                                  | 08/03/2006                  |  |
| EXAMINER                                                                                   |                                                                                                            | ART UNIT              |                                                                                                                                                                                                                                                                                                                                                    | CLASS-SUBCLASS                                                                                 | J                                                                                                                                                                                                                                                                                                                                                       |                             |  |
| ROJAS, MIDYS  1. Change of correspondence address or indication of "Fe                     |                                                                                                            | 2185                  |                                                                                                                                                                                                                                                                                                                                                    | 711-[12000                                                                                     | ·                                                                                                                                                                                                                                                                                                                                                       |                             |  |
| Address form PTO/SB/12  "Fee Address" indicat                                              | lence address (or Change of 22) attached.<br>ion (or "Fee Address" Indica<br>or more recent) attached. Use | ution form            | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  1 HOGAN & HARTSON LLP  2                                     |                                                                                                |                                                                                                                                                                                                                                                                                                                                                         |                             |  |
| 3. ASSIGNEE NAME AND                                                                       | RESIDENCE DATA TO B                                                                                        | E PRINTED ON T        | HE PATEN                                                                                                                                                                                                                                                                                                                                           | T (print or type)                                                                              | <u>., </u>                                                                                                                                                                                                                                                                                                                                              |                             |  |
| PLEASE NOTE: Unless<br>recordation as set forth in<br>(A) NAME OF ASSIGNI                  | `                                                                                                          |                       |                                                                                                                                                                                                                                                                                                                                                    | pear on the patent. If an assign<br>for filing an assignment.<br>ENCE: (CITY and STATE OR      |                                                                                                                                                                                                                                                                                                                                                         | locument has been filed for |  |
|                                                                                            |                                                                                                            |                       |                                                                                                                                                                                                                                                                                                                                                    | DSAKA, JAPAN                                                                                   |                                                                                                                                                                                                                                                                                                                                                         |                             |  |
| <del></del>                                                                                | ,                                                                                                          |                       | ,                                                                                                                                                                                                                                                                                                                                                  | _                                                                                              |                                                                                                                                                                                                                                                                                                                                                         | <b></b>                     |  |
| Please check the appropriate                                                               | assignee category or categor                                                                               | ries (will not be pri | nted on the p                                                                                                                                                                                                                                                                                                                                      | natent): 山 Individual 以(                                                                       | Corporation or other private gr                                                                                                                                                                                                                                                                                                                         | oup entity Government       |  |
| 4a. The following fee(s) are (国) tssue Fee 区 Publication Fee (No st区) Advance Order - # of | mall entity discount permitte                                                                              | d)                    | <ul> <li>p. Payment of Fee(s):</li> <li>□ A check in the amount of the fee(s) is enclosed.</li> <li>□ Payment by credit card, Form PTO-2038 is attached.</li> <li>□ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-1314 (enclose an extra copy of this form).</li> </ul> |                                                                                                |                                                                                                                                                                                                                                                                                                                                                         |                             |  |
| 5. Change in Entity Status                                                                 | (from status indicated above MALL ENTITY status, See 3                                                     |                       | □h Applie                                                                                                                                                                                                                                                                                                                                          | ant is no longer claiming SMA                                                                  | ATT ENTITY etains See 37 C                                                                                                                                                                                                                                                                                                                              | FR 1 27(a)(2)               |  |
|                                                                                            |                                                                                                            |                       |                                                                                                                                                                                                                                                                                                                                                    | ry) or to re-apply any previous<br>e other than the applicant; a reg                           |                                                                                                                                                                                                                                                                                                                                                         | 10,17                       |  |
| Authorized Signature                                                                       |                                                                                                            | ,                     |                                                                                                                                                                                                                                                                                                                                                    | Date <u>July 2</u>                                                                             |                                                                                                                                                                                                                                                                                                                                                         |                             |  |
| Typed or printed name $\underline{T}$                                                      | roy M. Schmelzer                                                                                           |                       |                                                                                                                                                                                                                                                                                                                                                    | Registration                                                                                   | No. <u>36,667</u>                                                                                                                                                                                                                                                                                                                                       |                             |  |
| This collection of informatio                                                              | n is remited by 37 CFR 13                                                                                  | 11 The information    | n is required                                                                                                                                                                                                                                                                                                                                      | to obtain or retain a benefit by                                                               | the public which is to file (au                                                                                                                                                                                                                                                                                                                         | d by the USPTO to process)  |  |

an application. Confidentiality is governed by 37 U.S.C. 122 and 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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